

瑪麗醫院外科部 傷口護理護士診所



下肢靜脈潰瘍的護理

瑪麗醫院 Queen Mary Hospital	Pamphlet Topic & Department Code
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Version 2

甚麼是下肢靜脈潰瘍?

這是由於靜脈病變引致下肢皮膚潰瘍 。主要出現在踝關節以上。如果沒有 適當處理,潰瘍有可能會日趨嚴重。

導致下肢靜脈潰瘍的主要原因

血液從心臟經動脈泵 出輸往身體各處、再 由靜脈回流心臟。靜 脈內壁有瓣膜,驅使 血液單向往心臟流動 如深層靜脈瓣膜功能 不全,引致血液滯留 在小腿間的靜脈,靜 脈壓便會增高,液體 便會滲出至細胞組織 之間,形成水腫。若 皮膚有小許損傷,便 會導致潰瘍產生。



正常 靜脈瓣膜 靜脈瓣膜 功能不全

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下肢靜脈潰瘍應如何處理?

治療主要著重於幫助滯留在下肢靜 脈的血液回流至循環系統。加壓繃 帶及壓力襪均能達到此目的。

加壓繃帶

加壓繃帶治療的目標是為了抵消腿 部的高靜脈壓,改善血液循環,減 低水腫,促進潰瘍的癒合。

- ◇ 一般而言,本診所會為患者提供 皮膚及傷口護理, 並重新包紮加 壓繃帶。
- ◇ 包紮加壓繃帶後,你的腳踝仍然 能夠活動如常。
- ◇ 若包紮後有不適或疼痛加劇,請 解除繃帶並聯絡你的傷口科護士。



抬腿與活動

當休息時,應盡量保持你的小腿 高於臀部,尤其是當你的腿部出 現水腫。目的是讓地心吸力促使 體液和積聚於下肢的血液回流入 循環系統,減少腿部腫脹。



- 躺在床或梳化上,用一至兩個枕頭 疊起抬腿,每天三至四次,每次三 十分鐘。
- 其餘時間應保持日常活動,但避免 長期站立。

其他治療

- 若出現傷口感染,醫牛可能會處方 抗生素治療,請導從醫囑完成治療。
- 如果傷口疼痛,醫生可能會處方止 痛藥。
- 醫生會根據你的情況來處方藥物 促進血液循環
- 在某些情況下,醫生會建議針對靜 脈曲張或相關的靜脈問題而進行手 術治療。

治療成效

研究顯示約有七成患者使用加壓繃 带包紮治療後,傷口癒合機會相對 提高。

傷口癒合後, 如何避免下肢靜脈潰瘍復發?

- 下肢靜脈潰瘍於癒合後必須長期穿 上壓力襪,以減低潰瘍復發的機會
- 每天起床前便穿上壓力襪,晚上洗 澡或睡覺前才除下。
- 壓力襪的彈性會日漸減退而鬆弛 故應每隔三至六個月更換一對。

- ◇ 壓力襪通常有不同壓力的級別,傷口 科或血管專科護士會替你量度下肢, 選擇適合你的壓力襪,並指導你穿著 技巧。
- 請注意:醫用壓力襪跟一般的緊身襪 褲的壓力絕不相同,不可混淆。
- 如果你依從醫護人員建議穿壓力襪 下肢靜脈潰瘍復發的機會將大大降低。



改變生活習慣可幫助傷口癒合 或減低潰瘍復發的機會

- 戒煙 香煙中的化學物質可能會阻礙 傷口癒合。
- 體重管理 肥胖是其中一個導致下肢 靜脈潰瘍的危險因素。
- 避免穿高跟鞋。
- 保護下肢,避免下肢創傷。
- 保持皮膚清潔及滋潤
- 正確坐姿,避免交叉腿和長時間站立。
- ◇ 健康的飲食習慣

適當運動

- 踝關節屈曲運動:以5-10次動作為 一組,每隔30分鐘進行一組練習 每組運動持續1-2分鐘。此運動可 促進靜脈回流(圖一)。
- 每天兩次急步行走30分鐘:此運動 可助小腿肌肉收縮,幫助積聚於下 肢的血液回流心臟,降低靜脈壓。
- ◇ 蹠屈曲小腿 肌肉運動:運用腳趾把 身體向上提升(圖二)。



(圖一)



(圖二)

如何處理加壓繃帶及壓力襪

- 可以手洗
- 水溫不應超過40℃
- 不可使用漂白劑
- ◇ 不需乾洗
- 晾乾 \Diamond

參考資料

- ♦ Fukaya, E., Klein, A., Lau, J. & Ratchford, E.V. (2023). Vascular Disease Patient Information Page: Venous leg ulcers. Vascular Medicine. Vol
- ⋄ Kenny, T. & Knott, L. (2010). Patients' Information on Venous Leg Ulcers. Patient.co.uk - Trusted Medical Information and Support. Retrieved from: http://www.patient.co.uk/health/Venous-Leg-Ulcers.htm.
- Wound Ostomy and Continence Nurses Society (2005). WOCN Clinical Practice Guideline Series: Guideline for Management of Wounds in Patients with Lower-Extremity Venous Disease. Glenview.





Care of Venous Leg Ulcer

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What is venous leg ulcer?

It is a wound on the lower leg or foot that occurs due to problem in your venous system. Without treatment, an ulcer may become larger and cause problems in the leg.

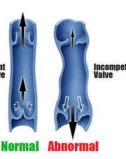
What causes venous leg ulcers?

Blood is pumped away from the heart through the arteries and returned to the heart through the veins. The veins have one-way valves to keep blood flowing in one direction. When the valves do not close properly, the blood can flow back in the wrong direction, causing venous

reflux and increasing pressure in the venous system. Prolonged venous hypertension will lead to fluid oozes out of the veins and pool beneath the skin.

This causes leg swelling, thickening

and skin damage,



Picture with the courtesy of Savannah Vascular and Cardiac Institute

which will eventually breaks down to form ulcers.

Venous leg ulcers treatment

The aim of the treatment is to allow the blood to return from the lower limbs. It can be achieved by using compression bandages or stockings.

The aim of compression therapy is to counteract the venous hypertension, improve circulation, reduce swelling and facilitate wound healing.

- Usually, we will provide skin and wound care, followed by application of compression bandage.
- ♦ After putting on the compression bandage, you should be able to move your ankle freely.
- After bandaging, if you feel unwell or increase in pain, remove the bandage and tell your nurse.





Limb elevation and exercise

Use pillows to elevate your lower limb above your hip level when you are resting or in bed so as to promote venous return and to reduce lower limb swelling.



- Do it 3-4 times a day, 30 minutes each time.
- You can maintain your daily activity as usual but remember to avoid prolonged standing.

Treatment outcome

♦ Research indicates that around 70% of the patients get better if they are treated with compression therapy.

Other therapy

- If there is infection, your doctor may prescribe antibiotics, finish the course of medicine according to the doctor's prescription.
- Your doctor may also prescribe medications to relieve your wound pain.
- Your doctor may prescribe medications to enhance blood circulation, depending on your condition.
- Your doctor may also suggest surgical treatment for varicose veins under some circumstances.

How to avoid the recurrence of venous ulceration

- ⋄ To reduce the recurrence of ulcer, one should put on medical grade compression stockings after the ulcer has healed.
- The stockings should be put on very first in the morning and removed before bed at night.
- Replace the stockings every 3-6 months as it gradually becomes less elastic.

- Your wound or vascular nurse will measure your limb size and give recommendations for selecting the size and type of compression stockings.
- Your wound or vascular nurse will show you how to put on and remove the stockings.



- Please do not mix up the medical grade compression stockings with ordinary pressure stockings. The pressure applied is different..
- There are fewer ulcer recurrences if you have good compliance on wearing compression stockings according to healthcare advice.

Healthy lifestyle can facilitate wound healing and reduce recurrence

- ♦ Stop smoking substances in cigarettes may interfere with wound healing.
- Weight management obesity is one of the risk factors leading to lower limb ulceration.
- Avoid high heel shoes.
- Protect your feet and avoid injuries.
- Keep your skin clean and moisturized

- Correct sitting posture, avoid crossing your feet and prolonged standing.
- ⋄ Keep a healthy diet.

Exercise

Ankle exercises (Fig.1) and Calf exercises (Fig.2): 5-10 times within 1-2 mins, repeat every 30 mins, these exercises can improve your venous return







(Fig. 1)

 Brisk walks for 30 mins twice daily: this exercise can help to squeeze the pooling blood back to your heart by contracting your leg muscles.

How to take care of your compression bandages and stockings

- Hand wash them.
- Use water temperature no hotter than 40°C.
- ⋄ Do not use bleach.
- ♦ Do not dry clean.
- Do not use a tumble dryer.

References

- Fukaya, E., Klein, A., Lau, J. & Ratchford, E.V. (2023). Vascular Disease Patient Information Page: Venous leg ulcers. Vascular Medicine. Vol 28(1):80-02
- Kenny, T. & Knott, L. (2010). Patients' Information on Venous Leg Ulcers. Patient.co.uk – Trusted Medical Information and Support. Retrieved from: http://www.patient.co.uk/health/Venous-Leg-Ulcers.htm.
- Wound Ostomy and Continence Nurses Society (2005). WOCN Clinical Practice Guideline Series: Guideline for Management of Wounds in Patients with Lower-Extremity Venous Disease. Glenview.